



CONTINUING EDUCATION SCHOLARSHIP (CES) SUMMER 2019 RELEASE FORM

Complete Section 1, manually sign, and forward to your college's Financial Aid Office to complete Section 2

Section 1: Completed by the STUDENT

The Financial Aid Office will not be able to complete Section 2 below until you provide all verification documents, if required.

	XXX - XX-		
Student First and Last Name (Please PRINT)	Soc. Sec. # (Last 4)	College ID #	MHS Grad Class

_____ Number of Credits to be taken during Summer

In order for MHS to support **living expenses for your actual weeks of summer enrollment**, you **must** either:

(1) enroll in 9 credits over multiple terms in same summer OR (2) enroll in 6 credits during a single summer term

During Summer 19:		
	Street Address	City, State, Zip
	Your Phone Number	Your Email Address

Information Release Statement: I give explicit written consent for the Financial Aid, Student Accounts, Registrar's or other offices at (Name of College/School): _____ to release my FAFSA information or other details regarding my aid eligibility, student account status, or grades to Milton Hershey School for the purposes of determining my scholarship eligibility.

Student Signature _____

Date: _____

Section 2: Completed by the COLLEGE Financial Aid Office

Financial Aid Office – Please only list the cost elements requested below. **Do NOT include books, personal, transportation costs, etc.** If the student is off-campus or a commuter, please leave the room & board fields blank. Thank you!

Questions? Contact our office at (717) 520-2037 or MHSGPS@mhs-pa.org

ALL DATA APPLIES TO SUMMER 2019 ONLY

Housing Status: _____ On-Campus _____ Off-Campus in Apt. _____ At Home/Relative (Commuter)

(1) CES Student Budget: **How many summer credits** are included in budget below? _____

How many credits does your school **consider full-time** for summer? _____

Tuition	\$ _____
Fees	\$ _____
Room – Standard Double Dorm Room Rate	\$ _____
Board – Standard Meal Plan Rate (15 – 19 meals)	\$ _____
Total	\$ _____

Payment Due Date for Summer Term?

This Student's Summer Session Beginning & Ending Dates _____ / _____ / _____ --- _____ / _____ / _____

(2) Is gift aid (grants/scholarships) available for summer (Pell Grant, Institutional Grant, etc)?? Yes No

(3) Did the student apply for summer financial aid? Yes No

(4) Gift Aid (Any/all grants, scholarships, benefits - Do NOT include MHS scholarship) \$ _____

(5) Maximum scholarship amount student may receive without jeopardizing current gift aid? \$ _____

Name of FAO: _____ Title: _____ Phone #: _____

Signature _____ Date: _____ Email: _____

Please forward completed form via one of the following: Email: MHSGPS@mhs-pa.org Fax: (717) 520-2033
Mail: Milton Hershey School, Graduate Programs for Success (GPS), PO Box 830, Hershey, PA 17033